





UTILITY
PATENT APPLICATION
TRANSMITTAL
Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	862.C1811		
First Name	ed Inventor or Application Identifier		
Т	ADAHIRO OHMI, ET AL.		
Express Mail Label No.			

Ī		APPLICATION ELI	EMENTS	ASSISTANT Commissioner for Patents				
	See MPEP chapter 600 concerning utility patent application contents.			ADDRESS TO: Box Patent Application Washington, DC 20231				
	Fee Transmittal Form (Submit an original, and a duplicate for fee processing)			6. Microfiche Computer Program (Appendix)				
	2. X	Specification To	tal Pages 128	7: Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)				
	3. X Drawing(s) (35 USC 113) Total Sheets 57		tal Sheets 57	a. Computer Readable Copy b. Paper Copy (identical to computer copy)				
	4. X	Oath or Declaration To	tal Pages 2	c. Statement verifying identity of above copies				
		a. Newly executed (original	al or copy)	ACCOMPANYING APPLICATION PARTS				
		b. X Unexecuted for informa	ition purposes	8. Assignment Papers (cover sheet & document(s))				
en in ten in ten in ten in	The entire disclosure of the prior application, from which a copy of the			9. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney				
1 E i				10. English Translation Document (if applicable)				
# FI				11. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations				
				12. Preliminary Amendment				
		incorporated by reference therein.		13. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				
	•			14. Small Entity Statement filed in prior application Status still proper and desired				
	•			15. Certified Copy of Priority Document(s) (if foreign priority is claimed)				
				16. Other:				
t	17. If a C	CONTINUING APPLICATION, chec	ck appropriate box and supp	ly the requisite information:				
-		Continuation Divisio	nal Continuatio	i-in-part (CIP) of prior application No.				
ţ	18. CORRESPONDENCE ADDRESS							
	X Customer Number or Bar Code Label (Insert Customer No. or Atta			514 ach bar code label here) or Correspondence address below				
}	Address		······································					
	City		State	Zip Code				
	Country		Telephone	Fax				

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CLAIMS	(1) FOR	(2) NUMBER F	ILED	(3) NUMBER EXTRA	(4) RATE		(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	10	8-20 =	88	X \$ 18.00 =		\$ 1,584.00
	INDEPENDENT CLAIMS (37 cfr 1.1	6(b))	3-3 =	0	X \$ 78.00 =		\$ 0
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d)) \$260.00				\$260.00 =		\$ 0
					BASIC (37 CFR 1	FEE 1.16(a))	\$ 690.00
		. ,		Total of	above Calculati	ions =	\$ 2,274.00
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).						
5 m					TO ⁻	TAI =	\$ 2,274.00
19. S a		Small entity statement is					
	i. A :	Small entity statement is small entity statement wad desired.					
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a b c	A A A A A A A A A A A A A A A A A A A	small entity statement wa d desired. no longer claimed.	s filed in	the prior nonprovisional	al application ar		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
NAME	T. Thomas Gellenthien, Reg. No. 39,683			
SIGNATURE	Tom Gellenthen			
DATE	February 1, 2000			

TCG/fdb/llp